

PHYSICAL EXAMINATION OF DRIVER

Driver's Name: _____ Date of Examination: _____

Address: _____

☐ New Certification

Social Security Number _____ Date of Birth _____ Age: _____

☐ Recertification

Health History

Yes	No	Yes	No	Yes	No	Yes	No
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If answer to any of the above is yes, explain _____

Physical Examination

GENERAL APPEARANCE AND DEVELOPMENT: Good: _____ Fair: _____ Poor: _____

VISION: For Distance: Right 20/____ Left 20/____ Both 20/____ Without corrective lenses ____ With Corrective lenses if worn _____

Evidence of disease of injury: Right _____ Left: _____

Color test _____ Horizontal field of vision: Right _____ Left _____

HEARING: Right ear: _____ Left ear: _____ Disease or injury _____

AUDIOMETRIC TEST: (Complete only if audiometer is used to test hearing) Decibel loss at 500 Hz _____ at 2,000 Hz _____

THROAT: _____

THORAX: Heart: _____

If organic disease is present, is it fully compensated? _____

Blood Pressure: Systolic _____ Diastolic _____

Pulse: Before exercise _____ Immediately after exercise _____

Lungs _____

ABDOMEN: Scars _____ Abnormal masses _____ Tenderness _____

Hernia: Yes _____ No _____ If so, where? _____ Is truss worn? _____

GASTROINTESTINAL: Ulceration or other disease: Yes: _____ No: _____

GENITO-URINARY: Scars _____ Urethral discharge _____

ROMBERG: Romberg _____ Pupillary _____ Light R _____ L _____

ACCOMMODATION: Right _____ Left _____

KNEE JERKS: Right: Normal _____ Increased _____ Absent _____

Left: Normal _____ Increased _____ Absent _____

REMARKS: _____

UPPER: _____ Lower: _____ Spine: _____

URINE: Spec. Gr. _____ Alb. _____ Sugar _____

OTHER LABORATORIAL DATA (serology, etc.) _____

RADIOLOGICAL DATA _____ Electrocardiograph _____

CONTROLLED SUBSTANCES TEST PERFORMED: _____ In accordance with subpart H _____ not in accordance with subpart H _____

CONTROLLED SUBSTANCES TEST NOT PERFORMED _____

GENERAL COMMENTS: _____

☐ CHECK HERE IF NOT QUALIFIED

(Name of Medical Examiner) (Print)	(Address of Medical Examiner)
(Title)	(License or Certificate No.) (State)
(Signature of Medical Examiner)	

NOTE: This section is to be completed only when visual test is conducted by a licensed ophthalmologist or optometrist.

Date of examination _____ Address of ophthalmologist or optometrist _____

Printed Name of Ophthalmologist or optometrist: _____ Signature _____

MEDICAL EXAMINER'S CERTIFICATE

I certify that I have examined _____ in accordance with the Federal Motor Carrier Safety Regulations. (49) CFR 391.41 - 391.49 and with the knowledge of his/her duties, I find him/her qualified under the regulations.

Qualified only when: _____ wearing corrective lenses _____ wearing a hearing aid.

Medically unqualified unless: _____ accompanied by a waiver _____ driving within exempt intracity zone.

MEDICAL EXAMINER'S INFORMATION	
Area Code & Telephone Number	License or Certificate No.
Name & Title of Medical Examiner (Print)	
State in Which Licensed	Signature of Medical Examiner

DRIVER'S INFORMATION
Expiration Date of Physical Exam
Address of Driver
Signature of Driver

Instructions for Performing and Recording Physical Examinations

The examining medical examiner should review these instructions before performing the physical examination. Answer each question yes or no where appropriate.

The examining medical examiner should be aware of the rigorous physical demands and mental and emotional responsibilities placed on the driver of a commercial motor vehicle. In the interest of public safety the examining medical examiner is required to certify that the driver does not have any physical, mental, or organic defect of such a nature as to affect the driver's ability to operate safely a commercial motor vehicle.

GENERAL INFORMATION. The purpose of this history and physical examination is to detect the presence of physical, mental, or organic defect of such a character and extent as to affect the applicant's ability to operate a motor vehicle safely. The examination should be made carefully and at least as complete as indicated by the attached form. History of certain defects may be cause for rejection or indicate the need for making certain laboratory tests of a further, and more stringent, examination. Defects may be recorded which do not, because of their character or degree, indicate that certification of physical fitness should be denied. However, these defects should be discussed with the applicant and he/she should be advised to take the necessary steps to insure correction, particularly of those which, if neglected, might lead to a condition likely to effect his/her ability to drive safely.

GENERAL APPEARANCE AND DEVELOPMENT. Note marked overweight. Note any posture defect, perceptible limp, tremor, or other defects that might be caused by alcoholism, thyroid intoxication, or other illnesses. The Federal Motor Safety Regulations provide that no driver shall use a narcotic or other habit-forming drug.

HEAD-EYES. When other than the Snellen chart is used, the results of such test must be expressed in values comparable to the standard Snellen test. If the applicant wears corrective lenses, these should be worn while applicant's visual acuity is being tested. If appropriate, indicate on the medical examiner's certificate by checking the line "qualified only when wearing corrective lenses". In recording distance vision use 20 feet as normal. Report al vision as a fraction with 20 as numerator the smallest type read as denominator. Not ptosis, discharge, visual fields, ocular muscle imbalance, color blindness, corneal scar, exophthalmos, or strabismus, uncorrected by corrective lenses. Monocular drivers are not qualified to operate commercial motor vehicles under existing Federal Motor Carrier Safety Regulations.

If the driver habitually wears contact lenses, or intends to do so while driving, there should be sufficient evidence to indicate that he/she has good tolerance and is well adapted to their use. The use of contact lenses should be noted on the record.

EARS. Note evidence of mastoid or middle ear disease, discharge, symptoms of aural vertigo, or Meniere's Syndrome. When recording hearing, record distance from patient at which a forced whispered voice can first be heard. If audiometer is used to test hearing, record decibel loss at 500 Hz, 1,000 hz and 2,000 Hz.

THROAT. Note evidence of disease, irremediable deformities of the throat likely to interfere with eating or breathing, or any laryngeal condition which could interfere with the safe operation of a motor vehicle.

THORAX-HEART. Stethoscopic examination is required. Note murmurs and arrhythmias, and any past or present history of cardiovascular disease of a variety know to be accompany by syncope, dyspnea, collapse, enlarged heart, or congestive heart failures. Electrocardiogram is required when findings of indicate.

BLOOD PRESSURE. Record with either spring or mercury column type of sphygmomanometer. If the blood pressure is consistently above 160/90 mm. Hg., further tests may be necessary to determine whether the driver is qualified to operate a motor vehicle.

LUNGS. If any lung disease is noted, state whether active or arrested; if arrested, your opinion as to how long it has been quiescent.

GASTROINTESTINAL SYSTEM. Note any diseases of the gastrointestinal system.

ABDOMEN. Note wounds, injuries scars, or weakness of the muscles of abdominal walls sufficient to interfere with normal function. Any hernia should be noted if present. State how long and if adequately contained by truss.

ABNORMAL MASSES. If present, note location, if tender, and whether or not applicant knows how long they have been present. If the diagnosis suggest that the condition might interfere with the control and safe operation of a motor vehicle, more stringent tests must be made before the applicant can be certified.

TENDERNESS. When noted, state where most pronounced, and suspected cause. If the diagnosis suggest that the condition might interfere with the control and safe operation of a motor vehicle, more stringent tests must be made before the applicant can be certified.

GENITO-URINARY. Urinalysis is required. Acute infection of the genito-urinary tract, as defined by local and State public health laws, indications from urinalysis of uncontrolled diabetes, symptomatic albumin-urea in the urine or other findings indicative of health conditions likely to interfere with the control and safe operation of a motor vehicle, will disqualify an applicant from operating a motor vehicle.

NEUROLOGICAL. If positive Romberg is reported indicate degrees of impairment. Pupillary reflexes should be reported for both light and accommodation. Knee jerks are to reported absent only when not obtainable upon reinforcement and as increased when foot is actually lifted from the floor following a light blow on the patella, sensory vibratory and positional abnormalities should be noted.

EXTREMITIES. Carefully examine upper and lower extremities. Record the loss or impairment of a leg, foot, toe, arm, hand or fingers. Note any and all deformities, the presence of atrophy, semi-paralysis or paralysis, or varicose veins. If a hand or finger deformity exists, determine whether sufficient grasp is present to enable the driver to secure ad maintain a grip on the steering wheel. If a leg deformity exists, determine whether sufficient mobility and strength exist to enable to driver to operate pedals properly. Particular attention should be given to and a record should be made of any impairment or structural defect which may interfere with the driver's ability to operate a motor vehicle safely.

SPINE. Note deformities, limitation of motion, or any history of pain, injuries, or disease, past of presently experienced in the cervical or lumbar spine region. If findings so dictate, radiologic and other examinations should be used to diagnose congenital or acquired defects; or spondylolisthesis and scoliosis.

RECTO-GENITAL STUDIES. Diseases or conditions causing discomfort should be evaluated carefully to determine the extent to which the condition might be handicapping while lifting, pulling, or during periods of prolonged driving time that might be necessary as part of the driver's duties.

LABORATORY AND OTHER SPECIAL FINDINGS. Urinalysis is required, as well s such other tests and the medical history or findings upon physical examination may indicate are necessary. A serological test is required if the applicant has a history of luetic infection or present physical findings indicate the possibility of latent syphilis. Other studies deemed advisable may be ordered by the examining medical examiner.

DIABETES. If insulin is necessary to control a diabetic condition, the driver is not qualified to operate a motor vehicle. If mild diabetes is noted at the time of examination and it is stabilized by use of a hypoglycemic drug and a diet that can be obtained while the driver is on duty, it should not be considered disqualifying. However, the driver must remain under adequate medical supervision.

CONTROLLED SUBSTANCES TESTING. If a test for controlled substances is performed as part of the medical examination, the medical examiner is to check the box next to the statement "Controlled substances test performed" on the medical examination form. If a test for controlled substances is not performed, the medical examiner is to check the box next to the statement, "Controlled substances test not performed." If a controlled substances test is performed under the requirements of subpart H of this part, then the medical examiner must also check the ox next to the statement, "In accordance with subpart H," and must obtain information that the results of such test were negative prior to certifying that the driver is otherwise medically qualified. If a controlled substance test is performed but not in accordance with subpart H,t he medical examiner must also check the box next to the statement, "not in accordance with subpart H," and ensure that the results of the test were negative prior to certifying that the driver is otherwise medically qualified.

The medical examiner must date and sign his/her findings upon completion of the examination.

MINIMUM REQUIREMENTS OF SECTION 391.41

(a) A person shall not drive a motor vehicle unless he/she is physically qualified to do so and, except as provided in §391.67 has on his/her person the original or a photographic copy, of a medical examiner's certificate that he/she is physically qualified to drive a motor vehicle.

(b) A person is physically qualified to drive a motor vehicle if that person -

(1) Has no loss of a foot, a leg, a hand, or an ar, or has been granted a waiver pursuant to §391.49.

(2) Has no impairment of:

(i) A hand or finger which interferes with prehension o power grasping; or

(ii) an arm, foot, or leg which interferes with the ability to perform normal tasks associated with operating a motor vehicle; or any other significant limb defect or limitation which interferes with the normal tasks associated with operating a motor vehicle; or has been granted a waiver pursuant to §391.49.

(3) Has no established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control;

(4) Has no current clinical diagnosis of myocardial infarction, angina pectoris, coronary insufficiency, thrombosis, or any other cardiovascular disease of a variety known to be accompanied by syncope, dyspnea, collapse, or congestive cardiac failure;

(5) Has no established medical history or clinical diagnosis of a respiratory dysfunction likely to interfere with his/her ability to drive a motor vehicle safely;

(6) Has no current clinical diagnosis of high blood pressure likely to interfere with his/her ability to operate a motor vehicle safely;

(7) Has no established medical history or clinical diagnosis of rheumatic; arthritic orthopedic, muscular, neuromuscular, or vascular disease which interferes with his/her ability to operate a motor vehicle safely;

(8) Has no established medical history or clinical diagnosis of epilepsy or any other condition which is likely to cause loss of consciousness or any loss of ability to control a motor vehicle;

(9) Has no mental, nervous, organic, or functional disease of psychiatric disorder likely to interfere with his/her ability to drive a motor vehicle safely;

(10) Has distant visual acuity of at least 20/40 (Snellen) in each eye without corrective lenses or visual acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision of at least 70° in the horizontal meridian of each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green and amber;

(11) first perceives a forced whispered voice in the better ear at not less than 5 feet with or without the use of a hearing aid, or if tested by the use of a audiometric device, does not have an average hearing loss in the better ear greater than 40 decibels at 500 Hz, 1,000 Hz, and 2,000 Hz with or without a hearing aid when the audiometric device is calibrated to American National Standard (formerly ASA Standard) Z24.5-1951;

(12) doe not use a Schedule 1 drug or other substance identified in Appendix D of this subchapter, an amphetamine, a narcotic, or any other habit-forming drug, except that a driver may use such a substance or drug if the substance or drug is prescribed by a licensed medical practitioner who is familiar with the driver's medical history and assigned duties ad who has advised he driver that the prescribed substance or drug will not adversely affect the driver's ability to safely operate a motor vehicle; and

(13) Has no current clinical diagnosis of alcoholism.

(c) drives subject to subpart H of this part shall be tested in compliance with the requirements of that subpart.